

10013115 8 8701

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		1534	
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	45	857	12/04/02
RESPONSE FORMALITY REVIEW	61	917	3 27-01

INDEX OF CLAIMS

✓ Rejected N
 = Allowed I
 — Through numerals Canceled A
 : Restricted Q

Non-elected
 Interference
 Appeal
 Objected

Claim	Date	Claim	Date	Claim	Date
Final Original		Final Original		Final Original	
1		51		101	
2		52		102	
3		53		103	
4		54		104	
5		55		105	
6		56		106	
7		57		107	
8		58		108	
9		59		109	
10		60		110	
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18		68		118	
19		69		119	
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42		92		142	
43		93		143	
44		94		144	
45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

If more than 150 claims are listed, staple additional sheets.